

PTO/SB/14 (08-05)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Application Data Sheet 37 CFR 1.76		Attorney Docket Number	PAT 2793-2
		Application Number	09/466,640
Title of Invention	METHOD AND APPARATUS FOR ASSOCIATING INFORMATION WITH AN OBJECT IN A FILE		
<p>The application data sheet is part of the provisional or nonprovisional application for which it is being submitted. The following form contains the bibliographic data arranged in a format specified by the United States Patent and Trademark Office as outlined in 37 CFR 1.76.</p> <p>This document may be completed electronically and submitted to the Office in electronic format using the Electronic Filing System (EFS) or the document may be printed and included in a paper filed application.</p>			

Secrecy Order 37 CFR 5.2

- ☐ Portions or all of the application associated with this Application Data Sheet may fall under a Secrecy Order pursuant to 37 CFR 5.2 (Paper filers only. Applications that fall under Secrecy Order may not be filed electronically.)

Applicant Information:


Applicant 1				
Applicant Authority		<input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117
				<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name	Suffix
Ms.	Laura	Ann	MAHAN	
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service				
City	Kanata	Country Of Residence		Canada
Citizenship under 37 CFR 1.41(b)		Canada		
Mailing Address of Applicant:				
Address 1	84 Stonemeadow Drive			
Address 2				
City	Kanata	State/Province	ON	
Postal Code	K2M 2M3	Country	Canada	
Applicant 2				
Applicant Authority		<input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117
				<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name	Suffix
Mr.	Kenneth	Steven Shaun	ILLINGWORTH	
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service				
City	Kanata	Country Of Residence		Canada
Citizenship under 37 CFR 1.41(b)		Canada		
Mailing Address of Applicant:				
Address 1	182 Walden Drive			
Address 2				
City	Kanata	State/Province	ON	
Postal Code	K2K 2K7	Country	Canada	
Applicant 3				
Applicant Authority		<input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117
				<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name	Suffix
Ms.	Kelly	Anne K.	FORBES	
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service				
City	Nepean	Country Of Residence		Canada

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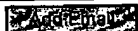

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		Application Number	09/466,640	
Title of Invention	METHOD AND APPARATUS FOR ASSOCIATING INFORMATION WITH AN OBJECT IN A FILE			
Citizenship under 37 CFR 1.41(b)		Canada		
Mailing Address of Applicant:				
Address 1	33 Parker Avenue			
Address 2				
City	Nepean	State/Province	ON	
Postal Code	K2G 3A6	Country	Canada	
All Inventors Must Be Listed - Additional Inventor Information blocks may be generated within this form by selecting the Add button. 				

Correspondence Information:

Enter either Customer Number or complete the Correspondence Information section below. For further information see 37 CFR 1.33(a).	
<input type="checkbox"/> An Address is being provided for the correspondence information of this application.	
Customer Number	26123
Email Address	ipinfo@blgcanada.com  

Application Information:

Title of the Invention	METHOD AND APPARATUS FOR ASSOCIATING INFORMATION WITH AN OBJECT IN A FILE		
Attorney Docket Number	PAT 2793-2	Small Entity Status Claimed	<input type="checkbox"/>
Application Type	Nonprovisional		
Subject Matter	Utility		
Suggested Class (if any)		Sub Class (if any)	
Suggested Technology Center (if any)			
Total Number of Drawing Sheets (if any)	5	Suggested Figure for Publication (if any)	
Publication Information:			
<input type="checkbox"/> Request Early Publication (Fee required at time of Request 37 CFR 1.219)			
<input type="checkbox"/> Request Not to Publish. I hereby request that the attached application not be published under 35 U.S.C. 122(b) and certify that the invention disclosed in the attached application has not been and will not be the subject of an application filed in another country, or under a multilateral agreement, that requires publication at eighteen months after filing.			

Representative Information:

Representative information should be provided for all practitioners having a power of attorney in the application. Providing this information in the Application Data Sheet does not constitute a power of attorney in the application (see 37 CFR 1.32). Enter either Customer Number or complete the Representative Name section below. If both sections are completed the Customer Number will be used for the Representative Information during processing.			
Please Select One:	<input checked="" type="radio"/> Customer Number	<input type="radio"/> US Patent Practitioner	<input type="radio"/> US Representative (37 CFR 11.9)

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		Application Number	09/466,640
Title of Invention	METHOD AND APPARATUS FOR ASSOCIATING INFORMATION WITH AN OBJECT IN A FILE		
Customer Number	26123		

Domestic Priority Information:


This section allows for the applicant to claim benefit under 35 U.S.C. 119(e), 120, 121, or 365(c). Providing this information in the application data sheet constitutes the specific reference required by 35 U.S.C. 119(e) or 120, and 37 CFR 1.78(a)(2) or CFR 1.78(a)(4), and need not otherwise be made part of the specification.

Prior Application Status			
Application Number	Continuity Type	Prior Application Number	Filing Date (YYYY-MM-DD)

Additional Domestic Priority Data may be generated within this form by selecting the Add button.

Foreign Priority Information:

This section allows for the applicant to claim benefit of foreign priority and to identify any prior foreign application for which priority is not claimed. Providing this information in the application data sheet constitutes the claim for priority as required by 35 U.S.C. 119(b) and 37 CFR 1.55(a).

			
Application Number	Country	Parent Filing Date (YYYY-MM-DD)	Priority Claimed
			<input type="radio"/> Yes <input checked="" type="radio"/> No

Additional Foreign Priority Data may be generated within this form by selecting the Add button.

Assignee Information:

Providing this information in the application data sheet does not substitute for compliance with any requirement of part 3 of Title 37 of the CFR to have an assignment recorded in the Office.

Assignee 1

If the Assignee is an Organization check here. ☒

Organization Name Nortel Networks Limited

Mailing Address Information:

Address 1	2351 Boulevard Alfred-Nobel		
Address 2			
City	St. Laurent	State/Province	PQ
Country	Canada	Postal Code	H4S 2A9
Phone Number		Fax Number	
Email Address			

Additional Assignee Data may be generated within this form by selecting the Add button.

Signature:

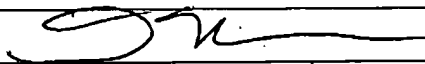
A signature of the applicant or representative is required in accordance with 37 CFR 1.33 and 10.18. Please see 37 CFR 1.4(d) for the form of the signature.

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		Application Number		09/466,640	
Title of Invention		METHOD AND APPARATUS FOR ASSOCIATING INFORMATION WITH AN OBJECT IN A FILE			
Signature				Date (YYYY-MM-DD)	
				2006-04-12	
First Name	Dennis R.	Last Name	Haszko	Registration Number	39,575

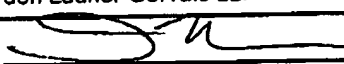
This collection of information is required by 37 CFR 1.76. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 23 minutes to complete, including gathering, preparing, and submitting the completed application data sheet form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

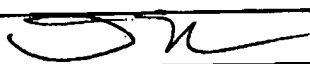
PTO/SB/21 (08-04)

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TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	09/466,640	
	Filing Date	December 20, 1999	
	First Named Inventor	Laura Ann MAHAN et al.	
	Art Unit	2163	
	Examiner Name	Marc R. FILIPCZYK	
Total Number of Pages in This Submission	5	Attorney Docket Number	PAT 2793-2

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. Application Data Sheet
Remarks Attention: Examiner: Mr. Marc R. FILIPCZYK Fax No.: 571-273-4019		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Borden Ladner Gervais LLP	
Signature		
Printed name	Dennis R. Haszko	
Date	April 12, 2006	Reg. No. 39,575

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:		
Signature		
Typed or printed name	Dennis R. Haszko	Date April 12, 2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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